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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 23] (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed Sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Brief Description of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 12]
- Oath or Declaration [Total Sheets 2]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting Inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
 6. Application Data Sheet. See 37 CFR 1.76

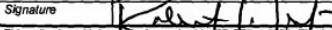
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner _____ Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | | |
|---|-----------------------------------|--|--|-----------------------------------|--|
| <input type="checkbox"/> Customer Number: | | | | OR | <input checked="" type="checkbox"/> Correspondence address below |
| Name | ROBERT C. CURFISS | | | Registration No. (Attorney/Agent) | 26,540 |
| Address | JACKSON WALKER L.L.P. | | | Art Unit: | |
| City | 112 EAST PECAN STREET, SUITE 2100 | | | State | TX |
| Country | SAN ANTONIO | | | Zip Code | 78205 |
| | | | | Telephone | 713/752-4322 |
| | | | | Fax | 713/752-4221 |

Name (Print/Type) ROBERT C. CURFISS Registration No. (Attorney/Agent) 26,540
Signature 

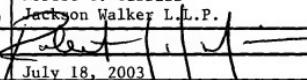
This collection of information is required by 37 CFR 1.51(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

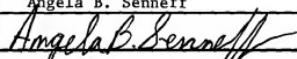
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| | | |
|--|----|------------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | | Application Number |
| | | Filing Date |
| | | First Named Inventor |
| | | Art Unit |
| | | Examiner Name |
| Total Number of Pages in This Submission | 41 | Attorney Docket Number |
| | | ECOMM |

| | | |
|---|---|---|
| ENCLOSURES (Check all that apply) | | |
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Utility Patent Application Utility Patent Application Transmittal <small>Combined Declaration and Power of Attorney Acknowledgement Postcard</small> |
| <input type="checkbox"/> Remarks _____ | | |

| | | |
|---|---|--|
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm or Individual name | Robert C. Curfiss Jackson Walker L.L.P. | |
| Signature |  | |
| Date | July 18, 2003 | |

| | | |
|---|--|------|
| CERTIFICATE OF TRANSMISSION/MAILING | | |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | |
| Typed or printed name | Angela B. Senneff | |
| Signature |  | Date |
| | July 18, 2003 | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and transmitting the information. This burden will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/6/2018
07/18/2018

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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 375.00

Complete if Known

| | |
|----------------------|---------------|
| Application Number | |
| Filing Date | JULY 18, 2003 |
| First Named Inventor | GRACE CHEN |
| Examiner Name | |
| Art Unit | |
| Attorney Docket No. | ECOMM |

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:

| | |
|------------------------|-----------------------|
| Deposit Account Number | 100096 |
| Deposit Account Name | JACKSON WALKER L.L.P. |

The Director is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
-
- Credit any overpayments
-
-
- Charge any additional fee(s) during the pendency of this application
-
-
- Charge fee(s) indicated below, except for the filing fee
-
- to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid | Fee Paid |
|--------------------|---------------|---------------|---------------|--|----------|----------|
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | | |
| 1053 | 130 | 1053 | 130 | Non-English specification | | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for ex parte reexamination | | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | | |
| 1252 | 410 | 2252 | 205 | Extension for reply within second month | | |
| 1253 | 930 | 2253 | 465 | Extension for reply within third month | | |
| 1254 | 1,450 | 2254 | 725 | Extension for reply within fourth month | | |
| 1255 | 1,970 | 2255 | 985 | Extension for reply within fifth month | | |
| 1401 | 320 | 2401 | 160 | Notice of Appeal | | |
| 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | | |
| 1403 | 280 | 2403 | 140 | Request for oral hearing | | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | | |
| 1453 | 1,300 | 2453 | 650 | Petition to revive - unintentional | | |
| 1501 | 1,300 | 2501 | 650 | Utility Issue fee (or reissue) | | |
| Total Claims | 11 | -20* | = | X 0 | | |
| Independent Claims | 2 | -3** = | = | X 0 | | |
| Multiple Dependent | | | | = | | |
| Subtotal (1) (\$) | 375 | | | | | |
| Fee from below | | | | | | |
| Extra Claims | | | | | | |
| Fee Description | | | | | | |
| Fee Paid | | | | | | |
| Fee Code (\$) | Fee Code (\$) | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid | Fee Paid |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | | |
| 1201 | 84 | 2201 | 42 | Independent claims in excess of 3 | | |
| 1203 | 280 | 2203 | 140 | Multiple dependent claim, if not paid | | |
| 1204 | 84 | 2204 | 42 | ** Reissue independent claims over original patent | | |
| 1205 | 18 | 2205 | 9 | ** Reissue claims in excess of 20 and over original patent | | |
| Subtotal (2) (\$) | 0 | | | | | |

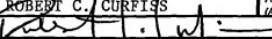
**or number previously paid, if greater; For Reissues, see above

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

(Complete if applicable)

| | | | | |
|-------------------|---|-----------------------------------|--------|------------------------|
| Name (Print/Type) | ROBERT C. CURFISS | Registration No. / Attorney/Agent | 26,540 | Telephone 713/752-4322 |
| Signature |  | | | Date JULY 18, 2003 |

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